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1639
1 Feb

PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|---|------------------------|------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/511,064-Conf. #8561 |
| | Filing Date | April 20, 2005 |
| | First Named Inventor | Scott Alan Jelinsky |
| | Art Unit | 1639 |
| | Examiner Name | J. S. Lundgren |
| Total Number of Pages in This Submission | Attorney Docket Number | 00630/0204187-US0 |

ENCLOSURES (Check all that apply)

| | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Amendment Transmittal |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|--------------------|----------|--------|
| Firm Name | DARBY & DARBY P.C. | | |
| Signature | | | |
| Printed name | Amy G. Klann | | |
| Date | May 24, 2006 | Reg. No. | 48,155 |



Application No. (if known): 10/511,064

Attorney Docket No.: 00630/0204187-US0

Certificate of Express Mailing Under 37 CFR 1.10

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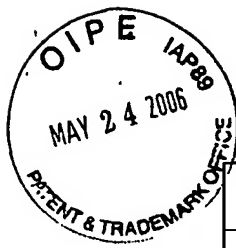
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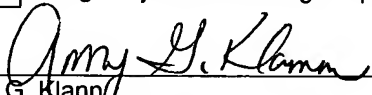
Transmittal (1 page)

Amendment Transmittal (1 page)

Amendment in Response to Non-Final Office Action (13 pages)

Return receipt postcard



| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 00630/0204187-US0 | |
|--|---|---|-----------------------------------|---------------------------------|------|
| Application No. 10/511,064-Conf. #8561 | | Filing Date April 20, 2005 | | Examiner J. S. Lundgren | |
| | | | | Art Unit 1639 | |
| Applicant(s): Scott Alan Jelinsky et al. | | | | | |
| Invention: ESTROGEN RECEPTOR ALPHA REGULATED GENE EXPRESSION RELATED ASSAYS AND THERAPEUTICS | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 120 | - 120 = | | x | |
| Independent Claims | 6 | - 6 = | | x | |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  Amy G. Klann Attorney/Agent Reg. No.: 48,155 | | | | Dated: <u>May 24, 2006</u> | |
| DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7637 | | | | | |



Docket No.: 00630/0204187-US0
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Scott Alan Jelinsky et al.

Application No.: 10/511,064

Confirmation No.: 8561

Filed: April 20, 2005

Art Unit: 1639

For: ESTROGEN RECEPTOR ALPHA
REGULATED GENE EXPRESSION
RELATED ASSAYS AND THERAPEUTICS

Examiner: Jeffrey S. Lundgren

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated February 24, 2006, with a date for response of May 24, 2006, and pursuant to Rule 111 of the Rules of Practice, please enter the following amendments and consider the accompanying remarks.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 10 of this paper.

Applicants request reconsideration of the subject application in view of the following amendments and remarks.